

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received City Clerk's Office

JUN 07 2019

Plea	ase type or print in ink.	1				
NAM	OF FILER	(LAST)	\	(FIRST)		(MIDDLE)
Tra	n		Richard			
1. (Office, Agency, or Co	urt				
7	Agency Name (Do not use a	cronyms)				
	City of Milpitas					
Ī	Division, Board, Department,	District, if applicable		Your Po	sition	
	City Council			Mayo	r	
-	► If filing for multiple position	s, list below or on an attachm	ent. (Do not use	e acronyms)		
	Agency:			_ Position	1:	
2.	Jurisdiction of Office	(Check at least one box)				
[State			☐ Judge	or Court Commissioner	(Statewide Jurisdiction)
1	Multi-County			☐ County	v of	
	•					
	Zi Oity of					
3.	Type of Statement (c	heck at least one box)				
[December 31,	ered is January 1, 2018, throu 2018.	gh	☐ Leav	_	k one circle.)
	-or- The period cov December 31, 2	ered is/	, through	le	he period covered is Jan aving office.	nuary 1, 2018, through the date of
[Assuming Office: Date	assumed/			he period covered is e date of leaving office.	, through
[Candidate: Date of Elec	ctionand	office sought, if			1
4.	Schedule Summary (must complete) 🕨	otal number	of pages in	cluding this cover	page:
	Schedules attached			, 0		. •
	Schedule A-1 - Inves	stments - schedule attached		Schedule C	- Income, Loans, & Busi	ness Positions – schedule attached
	Schedule A-2 - Inves	stments - schedule attached] Schedule D	- Income - Gifts - sched	dule attached
	Schedule B - Real F	Property - schedule attached] Schedule E	- Income – Gifts – Trave	l Payments - schedule attached
-0						
L		le interests on any sched	fule			
	Verification	NTDEET.	CITY		CTATE	ZID CODE
	MAILING ADDRESS (Business or Agency Address Recom	STREET mended - Public Document)	CITY		STATE	ZIP CODE
	455 E. Calaveras Blvo	l.	Milpitas		CA	95035
	DAYTIME TELEPHONE NUMBER			E-MAIL ADDRESS		
	(408) 586-3029				ilpitas.ca.gov	
	herein and in any attached so	chedules is true and complete.	I acknowledge	this is a public	document.	knowledge the information contained
	I certify under penalty of pe	erjury under the laws of the	State of Califorr	nia that the for	egoing is true and corr	rect.
	Date SignedJı	une 4, 2019	s	ignature 🔽		
		month, day, year)		_	(File the originally signed pape	r statement with your filing official.)



STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Dalityilderly Reference JAN 15 2019

Please type or print in ink.			RECEIVED
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Barbadillo	Garry		
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City of Milpitas			
Division, Board, Department, District, if	applicable	Your Position	
City Council		City Councilmember	
If filing for multiple positions, list beloeved Agency: JOHNT POWERS	JTY LIBRARY DISTING	den es la colo	
2. Jurisdiction of Office (Check	at least one box)		
∵ State	,	☐ Judge or Court Commissioner (Sta	tewide Jurisdiction)
Multi-County		County of	,
		·	
☑ City of Milpitas		Other	
3. Type of Statement (Check at le	east one box)		
Annual: The period covered is Ja December 31, 2017.	nuary 1, 201 % through	Leaving Office: Date Left	<u> 18 </u>
-or-	/	 The period covered is January leaving office. 	, 1, 2017, through the date of
Assuming Office: Date assumed		The period covered isthe date of leaving office.	, through
Candidate: Date of Election	and office sough	nt, if different than Part 1:	
			0 -
4. Schedule Summary (must of Schedules attached	omplete) > Total numbe	r of pages including this cover pag	ge:
Schedule A-1 - Investments - s	schedule attached	Schedule C - Income, Loans, & Business	Positions – schedule attached
Schedule A-2 - Investments - s		Schedule D - Income - Gifts - schedule	
Schedule B - Real Property - s		Schedule E - Income – Gifts – Travel Paj	ments - schedule attached
-or-			
☐ None - No reportable intere	sts on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pu	CITY CITY	STATE	ZIP CODE
455 E Calaveras Blvd	Milpit	as CA	95035
DAYTIME TELEPHONE NUMBER	·	E-MAIL ADDRESS	
(408) 586-3000		garry barbadillo	By Marian
I have used all reasonable diligence in herein and in any attached schedules in		iewed this statement and to the best of my kno e this is a public document.	owledge the information contained
December 19	2018	rnia that the foregoing is true and correct.	
Date Signed		Signature	ent with your filing official.)

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

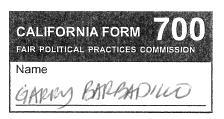
CHUMBARBANIA

(Ownership Interest is 10% or Greater)

► 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
LAW OFFICE OF GAMPY BARBADILD	
Name 16 COLN ING NE. STE. 134 MLPTKS, CA STBJ	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999 \$2,000 - \$10,000 \$\frac{1}{2}\$	\$2,000 - \$10,000//
\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000	\$10,001 - \$100,000 ACQUIRED DISPOSED \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship Other	Partnership Sole Proprietorship Other
YOUR BUSINESS POSITION OW NETL	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
	\$1,001 - \$10,000 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach à separate sheet if necessary.)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
None or Names listed below	None or Names listed below
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
LAW OWYE HEAVING SMICE	FPPC Form 700 (2017/2018) Sch. A-2

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)



1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
LAW OFFICE OF GMYM BAPABADILO	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
16 CORNING AVE, STE. BU MILLINK, OF 95735	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
LAW PRACTICE	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
ATTORNEY /OW NER	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
S500 - \$1,000 S1,001 - \$10,000	\$500 - \$1,000 \qquad \qqquad \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	OD
retail installment or credit card transaction, made in the	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's s:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDDESS (Dusiness Address Assessable)	%
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN
DUCINIESS ACTIVITY IF ANNY OF LENDED	None Personal residence
BUSINESS ACTIVITY, IF ANY, OF LENDER	
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	
\$500 - \$1,000	City
\$1,001 - \$10,000 .	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other(Describe)
	(2000.20)
Comments:	



Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Initial Filing Received City Clerk's Office

DEC 20 2018

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Grilli	Marsha	
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		·
City of Milpitas		·
Division, Board, Department, District, if app	olicable Your Pos	ition
City Council	City C	ouncilmember
► If filing for multiple positions, list below	or on an attachment. (Do not use acronyms)	
Agency:	Position	i
2. Jurisdiction of Office (Check at	least one box)	
State	·	or Court Commissioner (Statewide Jurisdiction)
<u> </u>	-	of
Multi-County		
☑ City of Milpitas	[_] Other _	
3. Type of Statement (Check at leas	t one box)	
Annual: The period covered is Janua December 31, 2017.	ury 1, 201 3 , through	ng Office: Date Left
-or- The period covered is December 31, 2017.		ne period covered is January 1, 2017, through the date of aving office.
Assuming Office: Date assumed	O Th	ne period covered is
Candidate: Date of Election	and office sought, if different than	Part 1:
4. Schedule Summary (must con Schedules attached	mplete) Total number of pages inc	cluding this cover page: <u> </u>
Schedule A-1 - Investments – sch Schedule A-2 - Investments – sch Schedule B - Real Property – sch -Or- None - No reportable interests	edule attached Schedule D - edule attached Schedule E -	Income, Loans, & Business Positions – schedule attached Income – Gifts – schedule attached Income – Gifts – Travel Payments – schedule attached
5. Verification		
MAILING ADDRESS STREET	CITY	STATE ZIP CODE
(Business or Agency Address Recommended - Public 455 E Calaveras Blvd	Document) Milpitas	CA 95035
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS	
(408) 586-3000		
	paring this statement. I have reviewed this statementer and complete. I acknowledge this is a public of	ent and to the best of my knowledge the information contained document.
I certify under penalty of perjury under	the laws of the State of California that the fore	egoing is true and correct.
Date Signed December 19, 20	18 Signature	Muse fell
(month, day, year)		(File the originally signed statement with your filing official.)

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

		Section 1800
CALIFORNIA FORM	70	10
FAIR POLITICAL PRACTICES C	OMMISSI	ION
Name		
Marsha Grilli		

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Marsha Grilli	
Name	Name
1182 Pescadero St , Milpitas	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
preschhol/daycare	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
□ \$0 - \$1 999	\$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED \$100,001 - \$1,000,000	\$100,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship	Partnership Sole Proprietorship Other
Outer	Olliei
YOUR BUSINESS POSITION Owner	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 X \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
S1,001 - \$10,000	LJ \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
None or Names listed below	None or Names listed below
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
LEASED BY THE BUSINESS ENTITY OR TRUST Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or	Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property	Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
	Leasehold Other
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
	FPPC Form 700 (2017/2018) Sch. A-2
Comments:	FPPC Form 700 (2017/2018) 3cn. A-2 FPPC Advice Email: advice@fppc.ca.gov

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

	200
CALIFORNIA FORM 700)
FAIR POLITICAL PRACTICES COMMISSION	
Name	-
Marsha Grilli	_

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Marsha Grilli	Dennis GRILLI
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1182 Pescadero , Milpitas Ca 95035	1182 Pescadero St Milpitas Ca 95035
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	retired
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
owner	retired/pension
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000	☐ \$10,001 - \$100,000 ☑ OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Loan repayment	Loan repayment
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
(Describe)	(Describe)
Other	Other
(Describe)	(Describe)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	RIOD
retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s: INTEREST RATE TERM (Months/Years)
	0/ Dhan
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
	☐ Real Branathy
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000	
	City
\$\begin{align*} \begin{align*} \begi	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other(Describe)
Comments:	



STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing Received
Official Use Only

City Clerk's Office

Please type or print in ink.

A PUBLIC DOCUMENT

JAN 3 1 2010

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Nunez	Robert	R	RECEIVED
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
City of Milpitas			
Division, Board, Department, District, if	applicable	Your Position	
District 3 City of Mi	pitas	City Council Member	
► If filing for multiple positions, list belo		use acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check	at least one box)		
☐ State		☐ Judge or Court Commissioner (Statewide	Jurisdiction)
Multi-County		County of	
⊠ City of Milpitas		Other	
3. Type of Statement (Check at le	east one box)		
Annual: The period covered is Jan December 31, 2018.	•	Leaving Office: Date Left/(Check one circle.)	
-or-	, through	,	
December 31, 2018.	, unough	-or- leaving office.	ro, though the date of
Assuming Office: Date assumed		The period covered is/ the date of leaving office.	/, through
Candidate: Date of Election	and office soug	ht, if different than Part 1:	
4. Schedule Summary (must c	omplete) ► Total numb	er of pages including this cover page:	
Schedules attached			
Schedule A-1 - Investments - s	chedule attached	Schedule C - Income, Loans, & Business Positio	ns – schedule attached
Schedule A-2 - Investments - s	chedule attached	☐ Schedule D - Income - Gifts - schedule attached	d
Schedule B - Real Property - s	chedule attached	$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$	 schedule attached
-or- ⊠ None - No reportable in	erests on any schedule		
5. Verification	orotto on any conocaro		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pu	CITY Discourage CITY	STATE	ZIP CODE
455 E. Calaveras Blvd.	Milpitas	CA 9503	5
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS	
(408) 586-3050			
I have used all reasonable diligence in pherein and in any attached schedules is		viewed this statement and to the best of my knowledge this is a public document.	the information contained
I certify under penalty of perjury und	er the laws of the State of Calif	ornia that the foregoing is true and correct.	
Date Signed 1-30-2	019	Signature	
(month, day, ye	ar)	(File the originally signed paper statement with	your filing official.)



STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received Official Use Only

COVER PAGE

A PUBLIC DOCUMENT

Filed Date: 04/01/2019 05:41 PM SAN: 021300015-STH-0015

Please type or print in ink.	A PUBLI	C DOCUMENT	0/111. 02.13	00013-3111-0013
NAME OF FILER (LAST)	(FIRST)			(MIDDLE)
Phan	Anthony			
1. Office, Agency, or Court				City Clerk's Office
Agency Name (Do not use acronyms)				
Santa Clara County Library District Joint	Powers Authority			APR 0 1 2019
Division, Board, Department, District, if applicable		Your Position		
		Alternate Board N	/lember	RECEIVED
▶ If filing for multiple positions, list below or on an att	achment. (Do not use a	cronyms)		
Agency: City of Milpitas		Position:Covr	ici Imem b	er
2. Jurisdiction of Office (Check at least one b	ox)			
☐ State		☐ Judge or Court Comm	nissioner (Statewide	Jurisdiction)
Multi-County		County of		
City of Milpitas		▼ Other Santa Clara		
3. Type of Statement (Check at least one box)				
Annual: The period covered is January 1, 2018, December 31, 2018.	through	Leaving Office: Date	e Left/ (Check one circle.)	J
The period covered is// December 31, 2018.	, through	The period covered leaving office.	ed is January 1, 201	8, through the date of
Assuming Office: Date assumed/	1	The period covered the date of leaving		through
Candidate: Date of Election	_ and office sought, if of	different than Part 1:		
4. Schedule Summary (must complete) ► Total number of pages including this cover page:5				
Schedules attached			, 0	
Schedule A-1 - Investments – schedule attach	ed 🔽 S	chedule C - Income, Loans,	& Rusiness Position	nadactte alluadas — 25
★ Schedule A-2 - Investments – schedule attach		chedule D - Income - Gifts		
Schedule B - Real Property – schedule attach		chedule E - Income - Gifts		1
			•	
-or- ☐ None - No reportable interests on a	ny schedule			
5. Verification 455 E. Cal	averas Blv	d. Milpita	S CA 950	35
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE
1370 Dell Avenue	Campbell		CA 95008	3
DAYTIME TELEPHONE NUMBER	EM	MAIL ADDRESS		
(408) 293-2326 ext:3090	atement I have reviewed	this statement and to the he	set of my knowlodgo	the information contained
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the informatic herein and in any attached schedules is true and complete. I acknowledge this is a public document.				A .
I certify under penalty of perjury under the laws of	the State of California t	that the foregoing is true a	and correct.	1-41
Date Signed04/01/2019 05:41 PM	Sign	atureEle	ectronic Submis	sion TV//
(month, day, year)	9		signed paper statement with y	our filing official.)

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Anthony Phan

(Ownership Interest is 10% or Greater)

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Invictus Strategy	
Name	Name
437 Greathouse Drive, Milpitas CA 95035	
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2 ■ Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Invictus Strategy	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
□ \$0 - \$1 999	\$0 - \$1,999
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership X Sole ProprietorshipOther	Partnership Sole Proprietorship Other
Volum Rusings Resident	
YOUR BUSINESS POSITION 1 TO SIGNATURE SIGNATURE SIGNATURE TO SIGNATURE SIGNATU	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
▼ \$0 - \$499	□ \$0 - \$499 □ \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	S500 - \$1,000 OVER \$100,000
<u>\$1,001 - \$10,000</u>	\$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
X None or Names listed below	☐ None or ☐ Names listed below
·	
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
	*
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2018/2019

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Anthony Phan

➤ 1. INCOME RECEIVED	► 1. INCOME RECEIVED			
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME			
City of Milpitas	City of San Jose Treatment Plant Advisory Committee			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
455 E Calaveras Blvd. Milpitas CA 95035	200 E Santa Clara St, San Jose, CA 95113			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION			
Councilmember	Alternate Member			
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED X No Income - Business Position Only			
\$500 - \$1,000 . X \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000			
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000			
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED			
Salary Souse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)			
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)			
Sale of	Sale of			
(Real property, car, boat, etc.) Loan repayment	(Real property, car, boat, etc.)			
	Commission or Rental Income, list each source of \$10,000 or more			
Commission or Rental Income, list each source of \$10,000 or more	Tremai income, list each source of \$10,000 of more			
(Describe)	(Describe)			
Other	⊠ Other Received stipend totaling less than \$500			
(Describe)	(Describe)			
a retail installment or credit card transaction, made in the	lending institution, or any indebtedness created as part of the lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's			
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)			
	% None			
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN			
BUSINESS ACTIVITY. IF ANY, OF LENDER	□ None □ Personal residence			
BUSINESS ACTIVITY, IF ANY, OF ELINDER				
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address			
\$500 - \$1,000				
\$1,001 - \$10,000	City			
\$10,001 - \$100,000	Guarantor			
OVER \$100,000	Other(Describe)			
	1			
Comments:				

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Anthony Phan

1. INCOME RECEIVED	► 1. INCOME RECEIVED				
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME				
Association of Bay Area Governments	Pinnacle Strategy				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
375 Beale St. Ste. 700, San Francisco, CA 94105	375 Beale St. Ste. 700, San Francisco, CA 94105				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
Attendance at meetings as needed					
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION				
Alternate Executive Board Member	Consultant				
GROSS INCOME RECEIVED ☐ \$500 - \$1,000 ☐ \$10,001 - \$100,000 ☐ OVER \$100,000	GROSS INCOME RECEIVED No Income - Business Position Only \$500 - \$1,000				
CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)				
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)				
Sale of	Sale of				
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)				
Loan repayment	Loan repayment				
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more				
(Describe)	(Describe)				
Other Received stipend totaling less than \$500	Other				
(Describe)	(Describe)				
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	RIOD				
a retail installment or credit card transaction, made in t	I lending institution, or any indebtedness created as part of he lender's regular course of business on terms available to atus. Personal loans and loans received not in a lender's s:				
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)				
	%				
ADDRESS (Business Address Acceptable)	OF CURITY FOR LOAD				
	SECURITY FOR LOAN None Personal residence				
BUSINESS ACTIVITY, IF ANY, OF LENDER	Notice Telsonal residence				
	Real Property				
HIGHEST BALANCE DURING REPORTING PERIOD	Sheet address				
\$500 - \$1,000	City				
\$1,001 - \$10,000	Character				
\$10,001 - \$100,000	Guarantor				
OVER \$100,000	Other				
	(Describe)				
Comments:					

SCHEDULE D Income - Gifts



▶ NAME OF SOURCE (Not an Acronym)				▶ NAME OF SOURCE (Not an Acronym)			
Asian Pacific American Leadership Foundation			SVO PAC				
ADDRESS (Business Address Acceptable)			ADDRESS (Business Address Acceptable)				
315 W 9th St. Suite 700, Los Angeles CA 90015				101 W Santa C	Clara St, Sai	n Jose, CA 95113	
BUSINESS ACTIVITY, IF ANY, OF SOURCE		-	BUSINESS ACTIVIT	Y, IF ANY, OF S	OURCE		
Nonprofit 501	сЗ						
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	-	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
11 / 29 / 18	<u>\$400</u>	Overnight Lodging	-	<u>03 , 02 , 18</u>	\$ <u>24</u>	Mayor's Breakfast	
<u>11 , 29 , 18</u>	<u>\$ 100</u>	Opening Reception	-	<u>08 , 23 , 18</u>	<u>\$ 50</u>	BBQ	
11 , 29 , 18	\$ <u>180</u>	Welcome Dinner	-		\$		
▶ NAME OF SOURCE	E (Not an Acronyn	n)	_	NAME OF SOURCE	(Not an Acrony	/m)	
Asian Pacific	American Lea	adership Foundation					
ADDRESS (Busines			-	ADDRESS (Busines	s Address Accep	otable)	
315 W 9th St.	Suite 700, Lo	os Angeles CA 90015					
BUSINESS ACTIVITY, IF ANY, OF SOURCE				BUSINESS ACTIVIT	Y, IF ANY, OF S	OURCE	
Nonprofit 501	c3						
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	-	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
11 , 30 , 18	<u>\$</u> 80	Breakfast	_	/	\$	·	
<u>11 , 30 , 18</u>	\$_100	Lunch	-		\$	<u> </u>	
11 , 30 , 18	\$ <u>85</u>	Closing Reception	_		\$		
► NAME OF SOURCE	E (Not an Acronyr	n)		► NAME OF SOURCE	(Not an Acrony	/m)	
	,	adership Foundation					
ADDRESS (Busines			ADDRESS (Busines	s Address Accep	otable)		
		os Angeles CA 90015					
BUSINESS ACTIVIT			-	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Nonprofit 501							
DATE (mm/dd/yy)		DESCRIPTION OF GIFT(S)	-	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
<u>11 , 29 , 18</u>	\$ <u>49</u>	Parking	-		\$		
	\$		-		\$		
	\$		_		\$		
Comments:	\$				\$		

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A PUBLIC DOCUMENT

Date Initial Filing Received City Clerk's Office

MAR 04 2019

NAME OF FILER (LAST) (FIRST) RECEIVED Tran Richard 1. Office, Agency, or Court Agency Name (Do not use acronyms) City of Milpitas Division, Board, Department, District, if applicable Your Position City Council Mayor ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) Agency: __ 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ Multi-County _ County of ____ ☑ City of Milpitas Other ___ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2018, through Leaving Office: Date Left ___ December 31, 2018. (Check one circle.) The period covered is ______, through The period covered is January 1, 2018, through the date of -or- leaving office. December 31, 2018. Assuming Office: Date assumed ______ O The period covered is ______, through the date of leaving office. _____ and office sought, if different than Part 1: . Candidate: Date of Election ____ 4. Schedule Summary (must complete) ► Total number of pages including this cover page: ___ Schedules attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments – schedule attached Schedule A-2 - Investments – schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached **-Or-** None - No reportable interests on any schedule Verification MAILING ADDRESS CITY STREET STATE ZIP CODE (Business or Agency Address Recommended - Public Document) 455 E Calaveras Blvd Milpitas CA 95035 DAYTIME TELEPHONE NUMBER EMAIL ADDRESS rtran@ci.milpitas.ca.gov (408)586-3029 I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed Signature (File the originally signed paper statement with your filing official.)